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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse	Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Delicia First name Lenise Middle name Alexander Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr.,	Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4186		

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Debtor 1 Delicia Lenise Alexander

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1878 Knox Street Cincinnati, OH 45214				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Hamilton County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Delicia Lenise Alexander

Case number (if known)

Par	t 2: Tell the Court About	our E	Bankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				f each, see <i>Notice Required by</i> page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing te box.	for Bankruptcy	
	choosing to file under	■ Chapter 7						
		☐ Chapter 11						
		□с	Chapter 12					
		□с	Chapter 13					
			·					
8.	How you will pay the fee		about how yo	ou may pay. Typic attorney is subm	cally, if you are paying the fee ye	ck with the clerk's office in your local cou ourself, you may pay with cash, cashier's alf, your attorney may pay with a credit of	s check, or money	
					Ilments. If you choose this opti (Official Form 103A).	on, sign and attach the Application for In	dividuals to Pay	
			ŭ		` '	n only if you are filing for Chapter 7. By I	aw. a iudge mav.	
		_	☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.					
9.	Have you filed for bankruptcy within the last 8 years?	■ No						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No	0					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye						
	anniate:		Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ N(o. Go to I	ine 12.				
	residence?	■ Ye	es Has yo	our landlord obtair	ned an eviction judgment agains	st you?		
				No. Go to line 12	2.			
			_			Judgment Against You (Form 101A) and	I file it with this	
				bankruptcy petit		odogment Agamst Tou (FOIII TOTA) and	a me it will tills	

		Document	Page 4 of 57	
Debtor 1	Delicia Lenise Alexander		Case number	⊖r (if known)

Part	3: Report About Any Bu	sinesses `	You Own	s a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	art 4.			
		☐ Yes.	Name	and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code			
	it to this petition.		Check	the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).				
	For a definition of small	No.	I am n	t filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ng under Chapter 11, but I am NOT a small business debtor according to the	e definition in the Bankruptcy		
		☐ Yes.	I am fi	ng under Chapter 11 and I am a small business debtor according to the defin	nition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Any	Hazardo	s Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	■ No. ☐ Yes.	What is t	e hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			ate attention is Phy is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	he property? Number, Street, City, State & Zip Code			
				Manuscri, Sassa, Say, State & Zip Sout			

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Debtor 1 Delicia Lenise Alexander

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 57 Case number (if known) Debtor 1 **Delicia Lenise Alexander** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Delicia Lenise Alexander Signature of Debtor 2 **Delicia Lenise Alexander** Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on February 28, 2019

MM / DD / YYYY

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Debtor 1 Delicia Lenise Alexander

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ George A. Diersing, Jr Signature of Attorney for Debtor	Date	February 28, 2019 MM / DD / YYYY
George A. Diersing, Jr Printed name		
George A. Diersing, Jr Firm name		
600 Vine Street-Suite 402 Cincinnati, OH 45202		
Number, Street, City, State & ZIP Code Contact phone (513) 721-4256	Email address	gdiersing@younginjurylaw.com
0003681 OH Bar number & State		

Ca	Se 1.19-DK-10044	Doc 1 Filed 0.		8/19 18.49.57 Desc Main
Fill in this inf	ormation to identify your	case:		
Debtor 1	Delicia Lenise Al	exander		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
Official F	Form 106Sum			
Summary	of Your Assets	and Liabilities ar	nd Certain Statistical	Information 12/15
Be as complete	te and accurate as possib	le. If two married people	are filing together, both are equ	ually responsible for supplying correct

information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 5,366.94 1c. Copy line 63, Total of all property on Schedule A/B..... 5,366.94 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 12,788.74 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 32.519.04 Your total liabilities \$ 45,307.78 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 1,843.29 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 1,881.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Delicia Lenise Alexander

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,439.62

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	12,788.74
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	12,788.74

			Document	Page 10 of 57			
Fill in this inform	nation to identify your	case and this	filing:				
Debtor 1	Delicia Lenise Al	exander					
	First Name	Middle N	lame	Last Name			
Debtor 2	First Name	M: J-II - N	I	LastNama			
(Spouse, if filing)	First Name	Middle N	ıame	Last Name			
United States Ba	nkruptcy Court for the:	SOUTHERN	DISTRICT OF OHI	10			
Case number						□ Che	ck if this is an
				_		_ 0	ended filing
							3
O(f) : 1 E	4.00 A /D						
Official Fo	<u>rm 106A/B</u>						
Schedul	e A/B: Prop	erty				12/1	5
hink it fits best. Be nformation. If more Answer every ques	e as complete and accura e space is needed, attach tion.	ate as possible. a separate she	If two married peoplet to this form. On th	an asset fits in more than one le are filing together, both are ne top of any additional pages	equally responsible for	supplying co	rrect
Part 1: Describe	Each Residence, Building	g, Land, or Othe	r Real Estate fou O	wn or have an interest in			
. Do you own or h	nave any legal or equitabl	e interest in an	y residence, building	, land, or similar property?			
■ No. Go to Pari	+ 2						
Yes. Where is							
☐ Yes. Where is	s the property?						
Part 2: Describe	Your Vehicles						
3. Cars, vans, tru □ No ■ Yes	ucks, tractors, sport u	tility vehicles	, motorcycles				
	nfiniti	14/1			Do not deduct secured	d claims or exe	mptions. Put
- Walto				ne property? Check one	the amount of any sec	ured claims on	Schedule D:
Model: Year:	2005		Debtor 1 only		Creditors Who Have C		
Approximate			Debtor 2 only Debtor 1 and Debtor 2	only	Current value of the entire property?		value of the you own?
Other inform			At least one of the deb			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
fair cond	ition				*		
			Check if this is comm (see instructions)	nunity property	\$2,000.00	<u>'</u>	\$2,000.00
Examples: Boar No Yes Add the dolla pages you ha	ts, trailers, motors, pers	onal watercraf you own for a . Write that nu	t, fishing vessels, so	icles, other vehicles, and a nowmobiles, motorcycle acc from Part 2, including any o	essories entries for	Current va	\$2,000.00
						portion you Do not dec	ou own? duct secured
							exemptions.
: Household as	and furnishings						

Household goods and furnishings *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

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Case number (if known) Document Debtor 1 **Delicia Lenise Alexander** Yes. Describe..... \$100 kitchenware and utensils, \$300 dinette set: \$50 tv stand. \$650.00 \$100 bed; \$50 lamp, \$50 rug; 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$190.00 \$40.00 cell phone; \$150 television set 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Normal clothes \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$50.00 Costume jewelry Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,090.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the

Schedule A/B: Property

Filed 02/28/19 Entered 02/28/19 18:49:57

portion you own?

Desc Main

Official Form 106A/B

Case 1:19-bk-10644

Doc 1

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Case number (if known) Debtor 1 **Delicia Lenise Alexander** Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ Yes..... Cash \$30.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Prepaid debit card Expectations prepaid debit card \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. **Rent Prepaid** Landlord, \$450.00 \$100.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

= ...

■ No

Debtor 1	Case 1:19-bk-10644 Delicia Lenise Alexander		Filed 02/2 Document		ne 13 of 57	/28/19 18:49:57 rase number (if known)	Desc Main
☐ Ye	s. Give specific information about the	nem				_	
Exal ■ No	nts, copyrights, trademarks, trademples: Internet domain names, web	sites, proce				ts	
Exal ■ No	nses, franchises, and other gener mples: Building permits, exclusive lic s. Give specific information about the	censes, co		ation hold	ings, liquor licens	es, professional licenses	
Money o	or property owed to you?						Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	refunds owed to you s. Give specific information about th	em, includ	ing whether you	already fil	ed the returns an	d the tax years	
		for 201	7 \$614.62:	for 201	8 \$508.85		\$1,123.47
		2017				Federal	\$514.62
		2018				Federal	\$508.8
		2017				State	Unknown
		2018				State	Unknowr
Exal ■ No	ily support mples: Past due or lump sum alimor s. Give specific information	ny, spousa	l support, child si	upport, ma	aintenance, divord	ce settlement, property se	ttlement
	or amounts someone owes you amples: Unpaid wages, disability insu- benefits; unpaid loans you m			benefits, s	sick pay, vacation	pay, workers' compensa	ntion, Social Security
	s. Give specific information						
Exa	ests in insurance policies mples: Health, disability, or life insur	ance; heal	th savings accou	ınt (HSA);	credit, homeown	er's, or renter's insurance	
■ No □ Ye	s. Name the insurance company of Company r		y and list its value	е.	Beneficiar	y:	Surrender or refund value:

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Deb	Document Page 14 of 57 Or 1 Delicia Lenise Alexander Case number (if known)
	ny interest in property that is due you from someone who has died f you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information
_	claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim
	other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim
35. A	ny financial assets you did not already list No Yes. Give specific information
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here
Part	Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.
	o you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38.
Part	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.
	o you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ■ No. Go to Part 7. □ Yes. Go to line 47.
Part	Describe All Property You Own or Have an Interest in That You Did Not List Above
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information
54.	Add the dollar value of all of your entries from Part 7. Write that number here
Part	List the Totals of Each Part of this Form
55. 56. 57. 58. 59. 60.	Part 1: Total real estate, line 2
62.	Total personal property. Add lines 56 through 61 \$5,366.94 Copy personal property total \$5,366.94

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$5,366.94

Fill in this infor	mation to identify your	case:		
Debtor 1	Delicia Lenise Al	exander		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is ar
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
2005 Infiniti 250,000 miles fair condition	\$2,000.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
\$100 kitchenware and utensils, \$300 dinette set; \$50 tv stand, \$100	\$650.00		\$650.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
bed; \$50 lamp, \$50 rug; Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2020:00(11)(4)(0)
\$40.00 cell phone; \$150 television set	\$190.00		\$190.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Normal clothes Line from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Ellie Helli Gorieddie 775.			100% of fair market value, up to any applicable statutory limit	2020:00(/-)(4)(4)
Costume jewelry	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Ellio IIolii Golloddio 7/D. 1211			100% of fair market value, up to any applicable statutory limit	

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Delicia Lenise Alexander Case number (if known)

Debio	Delicia Lenise Alexander			Case number (ii known)		
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption		
		Copy the value from Check only one box for each exemption. Schedule A/B				
_	ash ine from <i>Schedule A/B</i> : 16.1	\$30.00		\$20.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
LI	The Holli Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit	2029.00(A)(3)	
	or 2017 \$614.62: for 2018 508.85	\$1,123.47		\$455.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
•	ine from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
	or 2017 \$614.62: for 2018 508.85	\$1,123.47		\$668.47	Ohio Rev. Code Ann. § 2329.66(A)(18)	
-	ine from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	2020100(7.)(1.0)	
	re you claiming a homestead exemption Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cove No Yes	3 years after that for ca	ases fil	·	,	

Fill in this infor				
Debtor 1	Delicia Lenise Al	exander		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Ouse .	1.10 BK 10044	Door	Document I	Page	18 of 5	57 57		D 000	William
Fill i	n this informa	ation to identify your c	ase:							
Debt	tor 1	Delicia Lenise Alex	xander							
		First Name	Middle N	Name I	Last Name	Э				
Debt (Spou	tor 2 se if, filing)	First Name	Middle N	Name I	Last Name	Э				
Unite	ed States Bank	cruptcy Court for the:	SOUTHER	N DISTRICT OF OHIC)					
Case	e number									
(if kno				_					Check	if this is an
]	amend	ed filing
∩ffi	cial Form	106E/E								
		F: Creditors WI	ho Have	Insecured C	laim	e				12/15
		accurate as possible. Use						IDDIODITY		
eft. A	ttach the Contil and case numb	s Who Have Claims Secu nuation Page to this page per (if known). of Your PRIORITY Uns	e. If you have	no information to repor						
		s have priority unsecured								
_	☐ No. Go to Par	• •								
	Yes.									
2. L	List all of your pudentify what type possible, list the continuation	riority unsecured claims. of claim it is. If a claim has claims in alphabetical order an one creditor holds a part	s both priority a r according to	and nonpriority amounts, the creditor's name. If you	list that out of the control of the	laim here a	nd show both priority a	and nonprior	ity amount	s. As much as
(For an explanation	on of each type of claim, se	ee the instruct	ions for this form in the in:	struction	booklet.)	Total claim	Priority		Nonpriority
								amount		amount
2.1	Priority Cred	incinnati Income Ta	<u>X</u> L	ast 4 digits of account a	number	2794	\$1,208.74	\$	760.00	\$448.74
	805 Cent	ral Avenue, #600 ti, OH 45202	V	When was the debt incur	rred?	2014, 20	015, 2016	_		
		eet City State Zip Code		As of the date you file, th	ne claim	is: Check a	Ill that apply			
	Who incurred t	he debt? Check one.		☐ Contingent						
	Debtor 1 onl	у	[☐ Unliquidated						
	Debtor 2 onl	у	Γ	☐ Disputed						
	Debtor 1 and	d Debtor 2 only	Т	ype of PRIORITY unsec	ured cla	ıim:				
	☐ At least one	of the debtors and another	r [Domestic support oblig	gations					
	☐ Check if thi	s claim is for a communi	itv debt	Taxes and certain othe	er debts v	ou owe the	government			
		bject to offset?	•	Claims for death or per			•			
	■ No		_	Other. Specify	•	ŕ				
	☐ Yes			taxe and	2016,		4 (\$448.74) , 20 notice to Profe nts		.00)	

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Debtor 1 Delicia Lenise Alexander ase number (if known) 2.2 **Internal Revenue Service** Last 4 digits of account number \$11,134.00 \$11,134.00 \$0.00 Priority Creditor's Name 550 Main Street When was the debt incurred? 2014, 2015 and 2016 Cincinnati, OH 45202 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other, Specify ☐ Yes personal income tax owed for 2014, 2015 and 2016: \$4418.85. 4546.86; 2168.29 2.3 **Ohio Department of Taxation** Last 4 digits of account number \$446.00 \$446.00 \$0.00 Priority Creditor's Name Attn: Bankruptcy Division When was the debt incurred? 2014, 2015 and 2016 PO Box 530 Columbus, OH 43266-0030 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ■ Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify Ohio taxes for 2014, 2015 (\$266.00: \$180.00:) ☐ Yes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? □ No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Delicia Lenise Alexander	Case number (if known)	
6224 Chandler Trust	Last 4 digits of account number	Unknown
8767 Appleknoll Lane	When was the debt incurred? 2014	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community		
■ No		
Yes	■ Other Specify eviction claim, case 14 cv 18627	
Acceptance Now	Last 4 digits of account number XXXX	\$2,929.00
5501 Headquarters	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
· ·	<u></u>	
LI Yes	■ Other. Specify rental agreement for Value City Furniture	
ACE Cash Express	Last 4 digits of account number	\$400.00
1231 Greenway Drive, #700	When was the debt incurred? 2-13	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
_		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	••	
☐ Check if this claim is for a community		
debt Is the claim subject to offset?		
<u> </u>		
□ Yes	Other Specific Joan. Goodman Street, College Hill	
	Nonpriority Creditor's Name 8767 Appleknoll Lane Cincinnati, OH 45236 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Acceptance Now Nonpriority Creditor's Name 5501 Headquarters Plano, TX 75024 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes ACE Cash Express Nonpriority Creditor's Name 1231 Greenway Drive, #700 Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 fonly Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community on the community of the debtors and another Check if this claim is for a community of the claim subject to offset? Check if this claim is for a community of the claim subject to offset? No	Nonprointy Creditor's Name 3767 Applekp(ni) Lane Cincinnati, OH 45236

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Case number (if known)

Debte	Delicia Lenise Alexander	Case number (if known)	
4.4	CF Medical LLC	Last 4 digits of account number 6439	\$3,000.00
	Nonpriority Creditor's Name c/o CT Corporation System 1300 E. Ninth Street	When was the debt incurred? 2016	
	Cleveland, OH 44114 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
		assignee of Mercy Health West Hospital,	
	□Yes	notice to Mitchell D. Bluhm & Associates, LLC	
4.5	Chase Bank, n.a. Inquiries. Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00
	PO Box 15298 Wilmington, DE 19850-5298	When was the debt incurred? 2013	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify service charges, etc.	
4.6	Check\$mart	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name 7001 Post Road, #200 Dublin, OH 43016	When was the debt incurred? 2013	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Goodman Street	

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Delicia Lenise Alexander	Case number (if known)	
Cincinnati Bell	Last 4 digits of account number 3967	\$305.73
Nonpriority Creditor's Name 221 East Fouth Street, ML-1095 Cincinnati. OH 45202	When was the debt incurred? 2016	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify phone service	
City of Atlanta Water and Sewer		
Dept	Last 4 digits of account number	\$300.00
Nonpriority Creditor's Name 55 Trinity Avenue SW, 33900	When was the debt incurred? 1999	
Atlanta, GA 30303 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify water and sewer account	
Commonweath Finance	Last 4 digits of account number	\$506.00
Nonpriority Creditor's Name 245 Main Street Scranton, PA 18519	When was the debt incurred? 2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	assignee of medical claim of Mercy Cher. Specify Emergency Physicians	

Document Page 23 of 57 Debtor 1 Delicia Lenise Alexander ase number (if known) 4.1 0027 \$380.31 Duke - Bankruptcy Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 1321 - DEC45A 2016 When was the debt incurred? Charlotte, NC 28201 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No utility at 1403 Joseph Street, notice to ☐ Yes Other. Specify **Interstate Credit Collections** 4.1 7515 \$506.62 Duke Energy Co. Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy - Legal Dept** When was the debt incurred? 2018 PO Box 1421- DEC45A Charlotte, NC 28201 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No service at 1878 Knox Street, Cincinnati, ☐ Yes Other. Specify Ohio 45214 4.1 **EMP of Cincinnati LTD** \$0.00 **XXXX** Last 4 digits of account number Nonpriority Creditor's Name c/o US Acute Care Solutions When was the debt incurred? 2017 4535 Dressler Road, N.W. Canton, OH 44718 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

☐ Yes

debt

■ No

Other. Specify Recovery System

☐ Obligations arising out of a separation agreement or divorce that you did not

medical services, notice to Nationwide

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 24 of 57 Debtor 1 Delicia Lenise Alexander Case number (if known) 4.1 Fifth Third Bank \$989.32 Last 4 digits of account number 3 Nonpriority Creditor's Name MD 1MOC2G-4050 2015 When was the debt incurred? 38 Fountain Square Plaza Cincinnati, OH 45263 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No service charges, etc. collected by Allied ☐ Yes Other. Specify Interstate 4.1 0000 **Greater Cincinnati Waterworks** \$376.53 Last 4 digits of account number Nonpriority Creditor's Name PO box 5487 2016 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No water at 1403 Joseph Street (owner OPM ☐ Yes Other. Specify Management LLC?) Integrity Funding Ohio LLC/ Loan 4.1 9392 \$1.998.70 Last 4 digits of account number Max Nonpriority Creditor's Name 84 Villa Road When was the debt incurred? 2016 Greenville, SC 29615 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

■ Other. Specify Services

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

deficiency from repossession of 1998 Ford **Explorer, notice to Drummond Financial**

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Document Page 25 of 57 Debtor 1 Delicia Lenise Alexander ase number (if known) 4.1 J P Morgan/Chase Bank, N.A. 6597 \$1,018.37 Last 4 digits of account number 6 Nonpriority Creditor's Name 270 Park Avenue 2012 When was the debt incurred? New York, NY 10017 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No account collected by Integriety Solution ☐ Yes Other. Specify Services, Inc. 4.1 Leader Furniture Co. \$1,005.78 Last 4 digits of account number Nonpriority Creditor's Name 130 W. Elder 1999 When was the debt incurred? Cincinnati, OH 45202 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No judgment, case 99cv10678, notice to Other. Specify ☐ Yes Bradley Reisenfield, Esq. 4.1 Mercy Hospital West Hospital LLC \$1,017.60 1713 Last 4 digits of account number Nonpriority Creditor's Name 3300 Mercy West Blvd When was the debt incurred? 2016 Cincinnati, OH 45211-1103 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

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debt

■ No

☐ Yes

■ Other. Specify Partners, LLC

☐ Student loans

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

medical service, collected by Capio

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Metlife Auto and Home Insurance	Last 4 digits of account number 6730	\$3,011.
Nonpriority Creditor's Name 200 Park Avenue New York, NY 10166	When was the debt incurred? 10/27/15	_
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	subrogation claim, College Hill accident, my truck driven by my sister Wakita Williams, collected by Credit Collection Services	_
OPM Management, LLC	Last 4 digits of account number	Unknov
Nonpriority Creditor's Name PO Box 14147	When was the debt incurred? 2016	
Cincinnati, OH 45250 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify eviction lawsuit 16cv16852, notice to Stuart Richards, Esq	_
Progressive Leasing	Last 4 digits of account number	\$2,332.
Nonpriority Creditor's Name 256 West Data Drive Draper, UT 84020	When was the debt incurred? 2015	_
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify 1179 + 200 interest

Purchases at Long's Wholesale Furniture,

Document Page 27 of 57 Debtor 1 Delicia Lenise Alexander Case number (if known) 4.2 Randy Fischer \$2,380.00 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 1329 2013 When was the debt incurred? Flowery Branch, GA 30542 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No eviction case 13cv07987, notice to Thomas ☐ Yes Other. Specify Glennon, Esq 4.2 \$461.82 **Time Warner Cable- SWO Division** 1001 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1060 2018 When was the debt incurred? Carol Stream, IL 60132-1060 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No tv service, notice to Spectrum and Charter Other. Specify Communications ☐ Yes 4.2 **UC Health-**\$4,000.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: PFS Billing Disputes When was the debt incurred? 2016 3200 Burnet Avenue Cincinnati, OH 45229 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Credit

lacksquare Debts to pension or profit-sharing plans, and other similar debts

medical service, collected by Controlled

Page 28 of 57 Case number (if known) Document Debtor 1 Delicia Lenise Alexander

4.2	University of Cincinnati Hospital	Last 4 digits of account numb	nor.	\$4,000.00				
Nonpriority Creditor's Name 2830 Victory Parkway, Suite 135 Cincinnati, OH 45206 Number Street City State Zip Code Who incurred the debt? Check one.		Last + digits of account number						
		When was the debt incurred?	-					
		As of the date you file, the cla	im is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	<u> </u>	·						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsec	urad alaim.					
	☐ At least one of the debtors and another	Student loans	ureu ciaiii.					
	☐ Check if this claim is for a community debt	_	separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	separation agreement or divorce that you did not					
	■ No	Debts to pension or profit-sh	aring plans, and other similar debts					
	☐Yes	■ Other. Specify Credit C	service, collected by Controlled orp.	-				
4.2	Urgent Care Clifton	Last 4 digits of account numb		\$200.00				
6	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ200.00				
	2230 Auburn Avenue Cincinnati, OH 45219	When was the debt incurred?	2018	-				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply					
 □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 		☐ Contingent	☐ Contingent					
		☐ Unliquidated						
		☐ Disputed						
		•	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
	debt Is the claim subject to offset?	9						
	No	<u>-</u>						
	■ No	Other. Specify medical services Other. Specify medical services						
	Li res	Other. Specify	Sel Vices	-				
Part 3	List Others to Be Notified About a De	ebt That You Already Listed						
is tr	this page only if you have others to be notified ying to collect from you for a debt you owe to se more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill out	omeone else, list the original credito at you listed in Parts 1 or 2, list the a	or in Parts 1 or 2, then list the collection agenc	y here. Similarly, if you				
	and Address	On which entry in Part 1 or Part 2 did						
	Cash Express E. Kemper Rd	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Cla					
	innati, OH 45246		Part 2: Creditors with Nonpriority Unsecured	Claims				
	,	Last 4 digits of account number						
	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?					
	Cash Express	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Cla					
	Vine Street innati, OH 45217		■ Part 2: Creditors with Nonpriority Unsecured	Claims				
CITIC	iiiiau, 011 43217	Last 4 digits of account number						
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?					
	d Interstate	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Cla	ims				
	West Campus Road Albany, OH 43054		■ Part 2: Creditors with Nonpriority Unsecured	Claims				
IACM	Albally, Oll 43034	Last 4 digits of account number						
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?					
	d Interstate	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Cla	ims				
	Box 361445 mbus OH 43236		Part 2: Creditors with Nonpriority Unsecured	Claims				

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Case number (if known)

Debtor 1 Delicia Lenise Alexander		Case number (if known)
	Last 4 digits of account number	
Name and Address Bradley Reisenfeld, Esq 99cv10678 3962 Red Bank Road Cincinnati, OH 45227	On which entry in Part 1 or Part 2 did y Line 4.17 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Capio Partners 2222 Texoma Pkwy, #150 Sherman, TX 75090	On which entry in Part 1 or Part 2 did y Line 4.18 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Charter Communications 12405 Powerscourt Drive Saint Louis, MO 63131	On which entry in Part 1 or Part 2 did y Line 4.23 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Chase Bank Cincinnati 45 East Fourth Street Cincinnati, OH 45202	On which entry in Part 1 or Part 2 did y Line 4.5 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Controlled Credit PO Box 5154 Cincinnati, OH 45205-0154	On which entry in Part 1 or Part 2 did y Line 4.24 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Controlled Credit PO Box 5154 Cincinnati, OH 45205-0154	On which entry in Part 1 or Part 2 did y Line 4.25 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Credit Collection Services 725 Canton Street Norwood, MA 02062	On which entry in Part 1 or Part 2 did y Line 4.19 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Diversified Consultants for Charter Communication PO Box 551268 Jacksonville, FL 32255	On which entry in Part 1 or Part 2 did y Line 4.23 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Drummond Financial Services, LLC dba Loan Max 2009 E. Galbraith Road Cincinnati, OH 45237	On which entry in Part 1 or Part 2 did y Line 4.15 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Integrity Solution Services, Inc. PO Box 7230 Overland Park, KS 66207-0230	On which entry in Part 1 or Part 2 did y Line 4.16 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 2307
Name and Address Interstate Credit Collection 711 Coliseum Plaza Ct Winston Salem, NC 27108	On which entry in Part 1 or Part 2 did y Line 4.10 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Delicia Lenise Alexander		Case number (if known)	
Name and Address Law Offices of Mitchell D. Bluhm & Assoc	On which entry in Part 1 or Part 2 Line 4.4 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
3400 Texoma Parkway, #100 Sherman, TX 75090	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims	
	East 4 digits of account number		
Name and Address Long's Wholesale Furniture, Inc. 8451 Vine Street	On which entry in Part 1 or Part 2 Line 4.21 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Cincinnati, OH 45216	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Mercy Emergency Physicians, Inc. 3131 Queen City Avenue	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Cincinnati, OH 45238-2316		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Mercy Emergency Physicians, Inc.	On which entry in Part 1 or Part 2 Line 4.9 of (<i>Check one</i>):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims	
3300 Mercy Health Blvd		Part 2: Creditors with Nonpriority Unsecured Claims	
Cincinnati, OH 45211	Last 4 digits of account number		
Name and Address	-	did you link the entitied and the O	
Name and Address Mercy Health West Hospital LLC	On which entry in Part 1 or Part 2 Line 4.4 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
3300 Mercy West Blvd	2.110 <u>111 </u> 01 (0.1100).	Part 2: Creditors with Nonpriority Unsecured Claims	
Cincinnati, OH 45211-1103	Last 4 digits of account number	— Full 2. Stoulistic with Horipholity Shockarda Glamb	
	-		
Name and Address Metlife Service and Solutions 731 Levington Avenue	On which entry in Part 1 or Part 2 Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
731 Lexington Avenue New York, NY 10022		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	6730	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Nationwide Recovery System	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
501 Shelley, #300 Tyler, TX 75701		Part 2: Creditors with Nonpriority Unsecured Claims	
1,101, 12,10101	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Professional Recovery Consultants	Line 2.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
2700 Meridian Parkway, #200 Durham, NC 27713-2204		☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Darriam, 110 277 10 2204	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Spectrum	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 429542 Cincinnati, OH 45242		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Cilicilliati, Ori 43242	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Stuart Richards, Esq	Line 4.20 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
16cv16852 906 Main Street #405		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Cincinnati, OH 45202			
·	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Trumbull-Metlife II 6 Corporate Drive, #550	Line 4.19 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Shelton, CT 06484		■ Part 2: Creditors with Nonpriority Unsecured Claims	
·	Last 4 digits of account number		
Name and Address Value City Furniture	On which entry in Part 1 or Part 2 Line 4.2 of (<i>Check one</i>):	did you list the original creditor?	

value City Furniture

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Case number (if known) Document

Debtor 1 Delicia Lenise Alexander

650 Eastgate Dr, S, Suite A Cincinnati, OH 45245

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 12,788.74
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 12,788.74
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 32,519.04
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 32,519.04

Fill in this infor				
Debtor 1	Delicia Lenise Al	exander		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Landlord	lease of my residence

	Odoc 1.10 bk 10044	Docume	ent Page 33 of	57	10.01 D000 WIC	4111
Fill in thi	s information to identify your					
Debtor 1	Delicia Lenise Al	exander				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO			
Case nun	nher					
(if known)					☐ Check if this amended fili	
						9
Officia	al Form 106H					
Sche	dule H: Your Cod	ebtors				12/15
■ No □ Ye 2. Wi Arizo		I lived in a community pr Nevada, New Mexico, Pu	operty state or territory erto Rico, Texas, Washin	? (Community property	v states and territories ir	nclude
in lin Form	olumn 1, list all of your codebt le 2 again as a codebtor only i n 106D), Schedule E/F (Official Column 2.	f that person is a guaran	tor or cosigner. Make s	ure you have listed th	e creditor on Schedul	le D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The cre Check all schedule	ditor to whom you ow s that apply:	e the debt
3.1				☐ Schedule D, line	2	
3.1	Name			☐ Schedule E/F, li		
				☐ Schedule G, line		
	Number Street			•		
	City	State	ZIP Code			
3.2				☐ Schedule D, line		
3.2	Name			Schedule D, line		
				☐ Schedule G, line		
	Number Street					

State

City

ZIP Code

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E.II	:() :	(-1111								
	in this information totor 1		se Alexander							
	otor 2					_				
	-	otcy Court for the	SOUTHERN DISTRIC	T OF OHIO						
	se number						Check if this is: An amende A supplementation	ed filing		chapter
0	fficial Form	106I					MM / DD/ Y		wing date.	
	chedule I:		ome				IVIIVI / DD/ I	111		12/15
spo atta	use. If you are sep ch a separate she	parated and you	are married and not filir r spouse is not filing wi On the top of any addition	th you, do not inclu	ide inforr	nation a	bout your spo	ouse. If more	space is	needed,
1.	Fill in your empl information.	oyment		Debtor 1			Debtor 2	2 or non-filin	g spouse	
	•	•	Employment status	■ Employed			☐ Employed			
	information about		Employment status	☐ Not employed			☐ Not employed			
	employers.		Occupation	General Laborer						
	Include part-time, self-employed wo		Employer's name	M & M Metals Ir Inc.	nternatio	onal,				
	Occupation may or homemaker, if		Employer's address	840 Dellway Street Cincinnati, OH 45229						
			How long employed the	here? 13 mor	nths					
Par	rt 2: Give De	tails About Mon	thly Income							
	mate monthly incouse unless you are		ate you file this form. If y	you have nothing to r	eport for	any line,	write \$0 in the	space. Includ	de your nor	n-filing
	u or your non-filing e space, attach a s		ore than one employer, co	ombine the informatio	n for all e	mployers	s for that perso	on on the lines	s below. If y	ou need
						For	Debtor 1	For Debto		
2.			ry, and commissions (becalculate what the month)		2.	\$	2,080.00	\$	N/A	
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$	300.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	2,380.00	\$	N/A	

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Deb	otor 1	Delicia Lenise Alexander	-	Cas	e number (if kno	wn)			
				Fo	r Debtor 1			Debtor 2 or	se
	Cop	by line 4 here	4.	\$_	2,380.	00	\$		I/A
5.	Lie	all payroll deductions:							
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	405	E 4	¢	N.	1/4
	5a. 5b.	Mandatory contributions for retirement plans	5a. 5b.		495.	00	\$_ \$		<u>I/A</u> I/A
	5c.	Voluntary contributions for retirement plans	5c.	: -		00	\$_		I/A
	5d.	Required repayments of retirement fund loans	5d.	- : -		00	\$_		I/A
	5e.	Insurance	5e.	\$	41.		\$		I/A
	5f.	Domestic support obligations	5f.	\$	0.	00	\$	N	I/A
	5g.	Union dues	5g.	_		00	\$		I/A_
	5h.	Other deductions. Specify:	5h.	+ \$_	0.	00	+ \$	N	I/A_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	536.		\$		I/A_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,843.	29	\$_	N	I/A_
8.	Lis : 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income.	90	\$	0	00	¢	N.	1/4
	8b.	monthly net income. Interest and dividends	8a. 8b.			00 00	\$_ \$		I/A I/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Ψ_	0.	<u> </u>	Ψ_		<u>ura</u>
		settlement, and property settlement.	8c.			00	\$		I/A_
	8d.	• • •	8d.			00	\$		I/A
	8e.	Social Security	8e.	\$_	0.	00	\$_	N	I/A_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.	00	\$	N	I/A
	8g.	Pension or retirement income	 8g.	\$		00	\$		I/A
	8h.	Other monthly income. Specify:	_ 8h.	+ \$ _	0.	00	+ \$	N	I/A
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.0	00	\$		N/A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	£	1,843.29	\$		N/A = \$	1,843.29
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		1,043.23	•			1,043.23
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	depe		. ,		•	Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies						12. \$ _ Con	1,843.29
13.	Do	you expect an increase or decrease within the year after you file this form No.	?					mor	nthly income
		Yes. Explain: possible part-time, second job beginning April 2	010						
		possible part time, second job beginning April 2	· · · ,						

Filli	n this inf <u>orma</u>	tion to identify yo	our case:					
Debt		Delicia Lenis		nder			eck if this is:	
Debt (Spo	tor 2 buse, if filing)							wing postpetition chapter the following date:
Unite	ed States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO	<u> </u>		MM / DD / YYYY	
	e number nown)							
		rm 106J						
		J: Your		ISES . If two married people ar	o filing together b	oth are equ	ually roopensible fe	12/1
info	rmation. If m		eded, atta	ch another sheet to this				
Part	1: Descr	ibe Your House	hold					
	■ No. Go to □ Yes. Doe □ N	o line 2. s Debtor 2 live	·	ate household? al Form 106J-2, <i>Expens</i> es	s for Separate House	e <i>hold</i> of Del	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
								□ No □ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	expenses o	enses include f people other t d your depende	han $_{f \Box}$	No Yes				
Esti exp	mate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	e 4.	\$	475.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	·	0.00
		maintenance, re owner's associat	•	ıpkeep expenses dominium dues		4c. 4d.		0.00 0.00
5.				our residence, such as ho	me equity loans	5.	·	0.00

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	Delicia Lenise Alexander	Case num	ber (if known)	
3.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	200.00
	6b. Water, sewer, garbage collection	6b.	\$	68.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	· -	47.00
	6d. Other. Specify:	6d.		0.00
	Food and housekeeping supplies	— 7.		275.00
	Childcare and children's education costs	7. 8.	\$	
		9.	\$	0.00
	Clothing, laundry, and dry cleaning		·	50.00
	Personal care products and services Medical and dental expenses	10.	\$	30.00
	Transportation. Include gas, maintenance, bus or train fare.	11.	\$	30.00
	Do not include car payments.	12.	\$	250.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
	Charitable contributions and religious donations	14.	· -	0.00
	Insurance.		<u> </u>	0.00
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	· -	116.00
	15d. Other insurance. Specify:	15d.	·	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
	Specify: Estimated tax payments for 2014, 2015, 2016	16.	\$	150.00
	Installment or lease payments:		·	
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	·	0.00
	17d. Other. Specify:	17d.	· ·	0.00
	Your payments of alimony, maintenance, and support that you did not report as		<u> </u>	0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
	Other real property expenses not included in lines 4 or 5 of this form or on Scheo		our Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.		0.00
	Other: Specify: Major repairs for 2005 Infiniti, 250,000 miles	21.	·	150.00
•	wajor repairs for 2003 infiniti, 230,000 fines		- Ψ	130.00
<u>.</u>	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	1,881.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,881.00
	·			,,,,,,,,,
	Calculate your monthly net income.		•	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		1,843.29
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,881.00
	23c. Subtract your monthly expenses from your monthly income.	220	\$	-37.71
	The result is your monthly net income.	23c.	Ψ	-51.11

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F10 1 41	to before all on the blandforce					
Fill in tr	nis information to identify you	ur case:				
Debtor 1	Delicia Lenise A	Alexander Middle Name	Last Na			
Debtor 2		Middle Name	Last Na	ne		
(Spouse if,		Middle Name	Last Na	ne		
United S	States Bankruptcy Court for the	SOUTHERN DISTRICT	Γ OF OHIO			
Case nu	ımher					
(if known)		_			☐ Check if this is an amended filing	
If two may		ner, both are equally responsions in the second responsions for the second responsible to the se	onsible for supp s or amended s	olying correct informations		<u></u>
	Sign Below					
Dio	d you pay or agree to pay sor	neone who is NOT an atto	rney to help yo	u fill out bankruptcy	forms?	
	No					
	Yes. Name of person				uttach <i>Bankruptcy Petition Preparer's Notice</i> Declaration, and Signature (Official Form 11	
	der penalty of perjury, I decla t they are true and correct.	re that I have read the sun	nmary and sche	dules filed with this	declaration and	
Х	/s/ Delicia Lenise Alexan	der	x			
	Delicia Lenise Alexander Signature of Debtor 1		Si	gnature of Debtor 2		
	Date February 28, 2019		Da	ute		

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Fil	ll in this inform	nation to identify you	r case:				
De	ebtor 1	Delicia Lenise A	lexander Middle Name		Last Name		
1 1	ebtor 2 bouse if, filing)	First Name	Middle Name		Last Name		
Ur	nited States Bar	nkruptcy Court for the:		CT OF OH	HIO		
	ase number						
1	known)						Check if this is an amended filing
	fficial For		Affairs for Indi	vidua	ls Filing for B	ankruptcy	4/10
info nui	ormation. If member (if known	ore space is needed, n). Answer every que	attach a separate shee	t to this f	orm. On the top of any	equally responsible for s additional pages, write y	
1.	•			Tou Live	a belore		
1.	_	current marital statu	18 ?				
	■ Married■ Not married	ried					
2.	During the la	nst 3 years, have you	lived anywhere other th	nan wher	e you live now?		
	□ No						
	Yes. List	t all of the places you	lived in the last 3 years. D	o not incl	lude where you live now		
	Debtor 1 Pri	ior Address:	Dates Debto	or 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	1403 Jose Cincinnati	ph Street , OH 45237	From-To: 2016		☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:
	1230 Califo Cincinnati	ornia, 1st floor , OH 45213	From-To: 2017		☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:
3. sta	tes and territorie		-	_	-	ity property state or territ co, Texas, Washington and	
	■ No □ Yes. Ma	ke sure you fill out <i>Sc</i>	hedule H: Your Codebtors	s (Official	Form 106H).		
Da	art 2 Explai	ກ the Sources of Yoເ	ur Income	`	,		
	· ·						
4.	Fill in the tota	I amount of income yo	nployment or from oper ou received from all jobs a have income that you re	ind all bus	sinesses, including part-		ılendar years?
	□ No						
	Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(be	ross income efore deductions and cclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Document

Debtor 1 Delicia Lenise Alexander

					Debtor 1				Debtor 2		
					Sources of inco			s income e deductions and sions)	Sources of incommendation Check all that approximately		Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		■ Wages, components	missions,		\$5,616.00	☐ Wages, combonuses, tips	missions,				
					Operating a b	ousiness			Operating a l	ousiness	
	r last cale nuary 1 to			31, 2018)	■ Wages, components	missions,		\$27,068.14	☐ Wages, combonuses, tips	missions,	
					☐ Operating a b	ousiness			☐ Operating a I	ousiness	
	r the caler nuary 1 to			fore that: 31, 2017)	■ Wages, complete Wages, tips	missions,		\$14,338.70	☐ Wages, combonuses, tips	missions,	
					Operating a b	ousiness			☐ Operating a I	ousiness	
	and other winnings. List each No	r publ If yo sour	ic bene u are fil	fit payments; ing a joint cas the gross inco	pensions; rental ir se and you have in	ncome; interence income that ye	est; divid ou receiv	ends; money collected together, list it to		royalties; and btor 1.	ecurity, unemployment, d gambling and lottery
					Dobtos 4				Dobtos 2		
					Describe below.	ome	each	s income from source e deductions and sions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)
	r the caler nuary 1 to			fore that: 31, 2017)	Food stamps, February 2017 monthly			\$2,134.00			
Pai	rt 3: Lis	st Cei	rtain Pa	vments You	Made Before You	u Filed for B	Bankrup	tcv			
6.	Are eithe	er Del Ne ind Du	btor 1's ither D ividual	s or Debtor 2' ebtor 1 nor D primarily for a 90 days befo Go to line 7	s debts primarily bebtor 2 has prim personal, family, are you filed for ba	consumer arily consul or household nkruptcy, did	debts? mer deb d purpos	ots. Consumer debi e." y any creditor a tota	ıl of \$6,425* or mor	re?	1(8) as "incurred by an e total amount you
		* (Subject	paid that cre not include	editor. Do not inclupayments to an at	ude payment ttorney for th	ts for dor is bankr	mestic support obliquetcy case.		ild support ai	nd alimony. Also, do
	Vac		•	•	r both have prim				o. anor the date of	adjuditioni.	
	- 163								Il of \$600 or more?		
			l _{No.}	Go to line 7							
			Yes	include pay		c support ob			d the total amount y port and alimony. A		creditor. Do not nclude payments to an
	Credito	r's Na	ame an	d Address	Date	s of paymer	nt	Total amount paid	Amount you still owe	Was this p	ayment for

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Debtor 1	Delicia Lenise Alexander	Document	Case number (if known))
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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
	Landlord	December, 2018; January and February 2019, \$475 monthly rent	\$0.00	\$1,425.00	☐ Mortgag ☐ Car ☐ Credit Ca ☐ Loan Re ☐ Suppliers ☐ Other_re	ard payment s or vendors
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen- control, or owner of 20% or	eral partners; partner r more of their voting	erships of which yo g securities; and a	ou are a general ny managing a	al partner; corporations agent, including one for
	■ No					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto	cy, did you make any nav	paid		ccount of a d	eht that henefited an
0.	insider? Include payments on debts guaranteed or cos		nents of transfer a	пургорену он а	ccount of a u	ebi illai bellellieu ali
	_	grida by air incluor.				
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cred	ditor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	No No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?
	■ No. Go to line 11. □ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
	ordator Name and Address	Explain what happened	1	Duto		property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No	otcy, did any creditor, incl		nancial institutior	, set off any a	amounts from your
	Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		rty in the possess	ion of an assigne	e for the ben	efit of creditors, a
	No					
	☐ Yes					

Doc 1 Document

		Document
Dobtor 1	Delicia Lenise Alexander	
Debioi i	Delicia i enise Alexander	

Case 1:19-bk-10644 Filed 02/28/19 Entered 02/28/19 18:49:57 Desc Main Page 42 of 57 Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Nο Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of transferred Address or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You George A. Diersing, Jr \$500.00

Attorney Fees

July 12, 2017

Debt briefing \$50.00 February 2019 \$50.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

600 Vine Street-Suite 402 Cincinnati, OH 45202

gdiersing@younginjurylaw.com

Person Who Was Paid **Address**

Description and value of any property transferred

Date payment or transfer was made

Amount of payment Case 1:19-bk-10644 Doc 1 Filed 02/28/19 Entered 02/28/19 18:49:57 Desc Main Page 43 of 57
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Debtor 1 Delicia Lenise Alexander

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No								
	Yes. Fill in the details.								
	Person Who Received Transfer Address Description and value of property transferred payments received or debts paid in exchange								
	Person's relationship to you			F					
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein)		property to a s	elf-settled trust or	similar device of	f which you are a			
	■ No □ Yes. Fill in the details.								
	Name of trust	Description and val	ue of the prop	erty transferred		Date Transfer was			
						made			
Pai	rt 8: List of Certain Financial Accounts, Inst	truments, Safe Deposit E	Boxes, and Sto	rage Units					
20.	Within 1 year before you filed for bankruptcy	, were any financial acco	ounts or instru	ments held in your	name, or for you	ur benefit, closed,			
	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial account	s; certificates o	of deposit; shares i	,	,			
	■ No								
	Yes. Fill in the details.								
			<u> </u>		sold, or	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for b	ankruptcy, any	safe deposit box	or other deposite	ory for securities,			
	■ No								
	☐ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your h	ome within 1 y	ear before you file	d for bankruptcy	?			
	No								
	Yes. Fill in the details.	Whe also has as he	d 000000 I	Describe the conte	210	De veu etill			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or ha to it? Address (Number, Street and ZIP Code)		Jescribe the conte	its	Do you still have it?			
Pai	rt 9: Identify Property You Hold or Control for	or Someone Else							
23.	Do you hold or control any property that som for someone.	neone else owns? Includ	le any property	you borrowed from	n, are storing fo	r, or hold in trust			
	■ No								
	Yes. Fill in the details.	Mileana in the con		Dagarilla (l		\/			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proper (Number, Street, City, Star Code)		Describe the prope	rty	Value			
Pai	rt 10: Give Details About Environmental Info	rmation							

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Case number (if known) Document

Debtor 1 Delicia Lenise Alexander

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollu	tant, contaminant, or	similar term.						
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.								
24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	No								
	☐ Yes. Fill in the detail	s.							
	Name of site Address (Number, Street, City	, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice			
25. Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the detail	s.							
	Name of site Address (Number, Street, City	, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice			
26.	Have you been a party in	any judicial or admini	strative proceeding under any envi	ironn	nental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the detail	s							
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case			
Par	t 11: Give Details About	Your Business or Cor	nnections to Any Business						
				af	the fellowing connections to any	husiness?			
27.			did you own a business or have ar trade, profession, or other activity,	-	•	DUSINESS !			
	_		/ (LLC) or limited liability partnersh		·				
	_		(LEO) or infinited hability partiters in	p (L	Li <i>)</i>				
	☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation								
	<u> </u>	, ,	r equity securities of a corporation						
	_	_							
		e applies. Go to Part							
	Business Name		the details below for each business escribe the nature of the business	S.	Employer Identification number				
	Address				Do not include Social Security				
	(Number, Street, City, State and	Zir Code) Na	ame of accountant or bookkeeper		Dates business existed				
28.	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
	■ No								
	☐ Yes. Fill in the detail	s below.							
	Name Address (Number, Street, City, State and		ate Issued						
Don	4.42. Simp Bolow								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 1:19-bk-10644 Doc 1 Filed 02/28/19 Entered 02/28/19 18:49:57 Desc Main Page 45 of 57
Case number (if known) Document

Debtor 1 Delicia Lenise Alexander

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ De	elicia Lenise Alexa	ınder
Delicia Lenise Alexander Signature of Debtor 1		er Signature of Debtor 2
Date	February 28, 201	9 Date
Did you attach additional pages to <i>Your Statemen</i> ■ No		pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☐ Yes	3	
Did yo	u pay or agree to pa	y someone who is not an attorney to help you fill out bankruptcy forms?
No		
□ Yes	. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

In r	e Delicia Lenise Alexander		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF	COMPENSATION OF ATTORNE	EY FOR DI	EBTOR(S)
1.	compensation paid to me within one year be	ankr. P. 2016(b), I certify that I am the attorney for efore the filing of the petition in bankruptcy, or ag ntemplation of or in connection with the bankrupt	greed to be paid	to me, for services rendered or to
	For legal services, I have agreed to acc	cept	\$	600.00
		ive received	\$	500.00
	Balance Due		\$	100.00
2.	The source of the compensation paid to me	was:		
	■ Debtor □ Other (specify):	:		
3.	The source of compensation to be paid to m	ne is:		
	■ Debtor □ Other (specify):	:		
4.	■ I have not agreed to share the above-dis	sclosed compensation with any other person unles	ss they are mem	bers and associates of my law firm.
		sed compensation with a person or persons who a list of the names of the people sharing in the com		
5.	In return for the above-disclosed fee, I have	e agreed to render legal service for all aspects of t	he bankruptcy	case, including:
	b. Preparation and filing of any petition, scc. Representation of the debtor at the meetingd. [Other provisions as needed]	on, and rendering advice to the debtor in determine the dules, statement of affairs and plan which may ing of creditors and confirmation hearing, and any	be required; y adjourned hea	arings thereof;
		editors to reduce to market value; exempt d applications as needed; preparation and liens on household goods.		
6.	By agreement with the debtor(s), the above- Representation of the debtors any other adversary proceedi	-disclosed fee does not include the following serv s in any dischargeability actions, judicial l ing.	ice: lien avoidanc	es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete state bankruptcy proceeding.	tement of any agreement or arrangement for payr	ment to me for r	epresentation of the debtor(s) in
<u> </u>	February 28, 2019	/s/ George A. Diersing		
1	Date	George A. Diersing, J Signature of Attorney	r	
		George A. Diersing, J		
		600 Vine Street-Suite Cincinnati, OH 45202		
		(513) 721-4256 Fax: (9
		gdiersing@younginju Name of law firm		

Fill in this info	mation to identify your case:		Che	eck one box only as	directed in this form an	d in Form
Debtor 1	Delicia Lenise Alexander			A-1Supp:		
Debtor 2				1 Thoro is no pr	esumption of abuse	
(Spouse, if filing)				_		
United States	Bankruptcy Court for the: Southern District o	f Ohio	\		n to determine if a presu made under <i>Chapter 7</i>	
Case number					Official Form 122A-2).	Wedne real
(if known)					st does not apply now bary service but it could a	
			1	☐ Check if this is	an amended filing	
Official F	Form 122A - 1					
Chapter	7 Statement of Your Cur	rent Mon	thly Inc	ome		12/1
attach a separat case number (if qualifying milita	and accurate as possible. If two married people a e sheet to this form. Include the line number to w known). If you believe that you are exempted fror ry service, complete and file <i>Statement</i> of <i>Exemp</i> alculate Your Current Monthly Income	hich the addition	al information a of abuse because	pplies. On the top of se you do not have p	any additional pages, wr rimarily consumer debts	ite your name and or because of
	·					
`	your marital and filing status? Check one on	.y.				
_	narried. Fill out Column A, lines 2-11.			0.44		
	ed and your spouse is filing with you. Fill ou			2-11.		
_	ed and your spouse is NOT filing with you.	•		4 15 "	0.44	
	ing in the same household and are not lega			•		
pe	ing separately or are legally separated. Fill on the palty of perjury that you and your spouse are least on the parate of the seasons that do not include evading apart for reasons that do not include evading.	egally separated	under nonban	kruptcy law that app	olies or that you and you	
101(10A). Fo the 6 months	erage monthly income that you received from all start example, if you are filing on September 15, the 6-m, add the income for all 6 months and divide the total the same rental property, put the income from that property.	onth period would l by 6. Fill in the res	be March 1 throu ult. Do not includ	igh August 31. If the a le any income amount	mount of your monthly inco more than once. For exam	me varied during ple, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ess wages, salary, tips, bonuses, overtime, a eductions).	and commissio	ns (before all	\$ 2,439.62	\$	
	and maintenance payments. Do not include 3 is filled in.	payments from a	a spouse if	\$	\$	
of you of from an u and room	Ints from any source which are regularly par or your dependents, including child support. Inmarried partner, members of your household Inmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular, your dependen	contributions its, parents,	\$ 0.00	\$	
	me from operating a business, profession,	or farm			-	
		Debt	tor 1			
Gross red	ceipts (before all deductions)	\$ 0.00				
•	and necessary operating expenses	-\$ 0.00			•	
	hly income from a business, profession, or farr	n \$	Copy here ->	\$ 0.00	. \$	
6. Net inco	me from rental and other real property	Debt	tor 1			
C****	points (hofore all doductions)	\$ 0.00	.01 1			
	ceipts (before all deductions)	-\$ 0.00				
-	and necessary operating expenses hly income from rental or other real property	·	Copy here ->	\$ 0.00	\$	
	,	φ		\$ 0.00		
ι. interest,	dividends, and royalties			5.50		

Official Form 122A-1

Case 1:19-bk-10644 Doc 1 Filed 02/28/19 Entered 02/28/19 18:49:57 Desc Main Document Page 48 of 57

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Delicia Lenise Alexander

Case number (if known)

			Column A Debtor 1		Column B Debtor 2 or non-filing s		
8. Unemployment compensation			\$	0.00	\$		
Do not enter the amount if you contend that the amour the Social Security Act. Instead, list it here:	t received was a bene	fit under					
For your spouse	0.	.00					
 Pension or retirement income. Do not include any ar benefit under the Social Security Act. 			\$	0.00	\$		
10. Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or paymer manity, or internationa	nts I or	r	0.00	¢		
•			\$	0.00	\$ \$		
Total amounts from separate pages, if any.			Φ	0.00	\$		
		_	Ψ	0.00	Ψ		
 Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to 		\$	2,439.62	+ -		= \$2,439.62	<u> -</u>
						Total current month income	ıly
Part 2: Determine Whether the Means Test Applies	to You					income	
12. Calculate your current monthly income for the year	. Follow these steps:						
12a. Copy your total current monthly income from line	11		Сору	line 11 h	ere=>	\$\$	<u> </u>
Multiply by 12 (the number of months in a year)						x 12	_
12b. The result is your annual income for this part of the	e form				12b.	\$29,275.44	-
13. Calculate the median family income that applies to	you. Follow these ste	ps:					
Fill in the state in which you live.	ОН						
Fill in the number of people in your household.	1						
Fill in the median family income for your state and size To find a list of applicable median income amounts, go	online using the link s		in the separa		13. ions	\$ 48,441.00	<u>-</u>
for this form. This list may also be available at the bank	cruptcy cierk's office.						ĺ
14. How do the lines compare?							
Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.Go to Part 3.							
14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	t, The pre	esumption of	abuse is d	determined by	Form 122A-2.	
Part 3: Sign Below							
By signing here, I declare under penalty of perjury	that the information o	n this sta	atement and i	n any atta	chments is tru	ue and correct.	
X /s/ Delicia Lenise Alexander							
Delicia Lenise Alexander Signature of Debtor 1							
Date February 28, 2019 MM / DD / YYYY							
If you checked line 14a, do NOT fill out or file For	m 122A-2.						
If you checked line 14b, fill out Form 122A-2 and							

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7 :	Liquidation	
\$	245	filing fee	
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
\$	335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 6224 Chandler Trust 8767 Appleknoll Lane Cincinnati, OH 45236

Acceptance Now 5501 Headquarters Plano, TX 75024

ACE Cash Express 1231 Greenway Drive, #700 Irving, TX 75038

Ace Cash Express 1667 E. Kemper Rd Cincinnati, OH 45246

Ace Cash Express 4981 Vine Street Cincinnati, OH 45217

Allied Interstate 7525 West Campus Road New Albany, OH 43054

Allied Interstate PO Box 361445 Columbus, OH 43236

Bradley Reisenfeld, Esq 99cv10678 3962 Red Bank Road Cincinnati, OH 45227

Capio Partners 2222 Texoma Pkwy, #150 Sherman, TX 75090

CF Medical LLC c/o CT Corporation System 1300 E. Ninth Street Cleveland, OH 44114

Charter Communications 12405 Powerscourt Drive Saint Louis, MO 63131

Chase Bank Cincinnati 45 East Fourth Street Cincinnati, OH 45202

Chase Bank, n.a. Inquiries. PO Box 15298
Wilmington, DE 19850-5298

Check\$mart 7001 Post Road, #200 Dublin, OH 43016

Cincinnati Bell 221 East Fouth Street, ML-1095 Cincinnati, OH 45202

City of Atlanta Water and Sewer Dept 55 Trinity Avenue SW, 33900 Atlanta, GA 30303

City of Cincinnati Income Tax 805 Central Avenue, #600 Cincinnati, OH 45202

Commonweath Finance 245 Main Street Scranton, PA 18519

Controlled Credit PO Box 5154 Cincinnati, OH 45205-0154

Credit Collection Services 725 Canton Street Norwood, MA 02062

Diversified Consultants for Charter Communication PO Box 551268 Jacksonville, FL 32255

Drummond Financial Services, LLC dba Loan Max 2009 E. Galbraith Road Cincinnati, OH 45237

Duke - Bankruptcy PO Box 1321 - DEC45A Charlotte, NC 28201

Duke Energy Co.
Bankruptcy - Legal Dept
PO Box 1421- DEC45A
Charlotte, NC 28201

EMP of Cincinnati LTD c/o US Acute Care Solutions 4535 Dressler Road, N.W. Canton, OH 44718

Fifth Third Bank
MD 1MOC2G-4050
38 Fountain Square Plaza
Cincinnati, OH 45263

Greater Cincinnati Waterworks PO box 5487 Carol Stream, IL 60197

Integrity Funding Ohio LLC/ Loan Max 84 Villa Road Greenville, SC 29615

Integrity Solution Services, Inc. PO Box 7230 Overland Park, KS 66207-0230

Internal Revenue Service 550 Main Street Cincinnati, OH 45202

Interstate Credit Collection 711 Coliseum Plaza Ct Winston Salem, NC 27108

J P Morgan/Chase Bank, N.A. 270 Park Avenue New York, NY 10017

Law Offices of Mitchell D. Bluhm & Assoc 3400 Texoma Parkway, #100 Sherman, TX 75090

Leader Furniture Co. 130 W. Elder Cincinnati, OH 45202

Long's Wholesale Furniture, Inc. 8451 Vine Street Cincinnati, OH 45216

Mercy Emergency Physicians, Inc. 3131 Queen City Avenue Cincinnati, OH 45238-2316

Mercy Emergency Physicians, Inc. 3300 Mercy Health Blvd Cincinnati, OH 45211

Mercy Health West Hospital LLC 3300 Mercy West Blvd Cincinnati, OH 45211-1103

Mercy Hospital West Hospital LLC 3300 Mercy West Blvd Cincinnati, OH 45211-1103

Metlife Auto and Home Insurance 200 Park Avenue New York, NY 10166

Metlife Service and Solutions 731 Lexington Avenue New York, NY 10022

Nationwide Recovery System 501 Shelley, #300 Tyler, TX 75701

Ohio Department of Taxation Attn: Bankruptcy Division PO Box 530 Columbus, OH 43266-0030

OPM Management, LLC PO Box 14147 Cincinnati, OH 45250

Professional Recovery Consultants 2700 Meridian Parkway, #200 Durham, NC 27713-2204

Progressive Leasing 256 West Data Drive Draper, UT 84020

Randy Fischer PO Box 1329 Flowery Branch, GA 30542

Spectrum PO Box 429542 Cincinnati, OH 45242

Stuart Richards, Esq 16cv16852 906 Main Street #405 Cincinnati, OH 45202

Time Warner Cable- SWO Division PO Box 1060 Carol Stream, IL 60132-1060

Trumbull-Metlife II 6 Corporate Drive, #550 Shelton, CT 06484 UC Health-Attn: PFS Billing Disputes 3200 Burnet Avenue Cincinnati, OH 45229

University of Cincinnati Hospital 2830 Victory Parkway, Suite 135 Cincinnati, OH 45206

Urgent Care Clifton 2230 Auburn Avenue Cincinnati, OH 45219

Value City Furniture 650 Eastgate Dr, S, Suite A Cincinnati, OH 45245